

PARISHIONER REGISTRATION

St. Mary - Holy Cross Parish

Rev. Ross Parker, Pastor

Date _____

Family Name: _____

Address: _____

First Name: _____ Date of Birth: _____

Male

Phone: _____

Email: _____

Catholic _____ Non-Catholic _____

First Name: _____ Date of Birth: _____

Female

Phone: _____

Email: _____

Catholic _____ Non-Catholic _____

Maiden Name: _____

Children: _____ Date of Birth _____ Age _____ Grade _____

_____ Date of Birth _____ Age _____ Grade _____

_____ Date of Birth _____ Age _____ Grade _____

_____ Date of Birth _____ Age _____ Grade _____

I would appreciate a visit from the priest _____

I am interested in becoming Catholic _____



We welcome you to our parish family!